

Phones: 717 — 434-2501 434-2511

MOUNTAIN VIEW SCHOOL DISTRICT
Kingsley, Pennsylvania 18826

JAMES NEDDOFF
Superintendent

THOMAS A. RUTHERFORD
Secretary - Business Manager

APPLICATION FOR SUBSTITUTE TEACHING

NAME Silas R. Powell Date of Birth 12-12-1943

Address P. O. Box 161, Carbondale, PA 18407 Phone 717-679-2979

Educational Preparation

Name and Location of college Penn State (B.A., 1965); George Washington University (M.A., ~~1967~~), Indiana University (Ph.D., 1974)

Major field of study French language and literature Minor Phonology, fine arts

Year of Graduation 1965, 1967, 1974 Degree received B.A., M.A., Ph.D.

Graduate work completed M.A., Ph.D. Social Security Number 198-34-0586

Certification**

**PLEASE attach a copy of your professional certificate

Kind of certificate: (check one) Year of Issue

____ College Provisional
____ College Permanent
__X__ Other Professional Certificate, Instructional I — August 1984
Commonwealth of Pennsylvania

Full-Time Teaching Experience

Date From—To	Name of School	Location	Teaching Assignment	Total Months Taught
1965-1967	George Washington University	Washington, DC	Grad. Teaching Ass't	18
1967-1970	Indiana University	Bloomington, IN	Teaching Associate	27
1970-1971	State University of New York	Oswego, NY	Ass't Professor	09
1973-1974	Brooklyn College of the CUNY	Brooklyn, NY	Adjunct Lecturer in Modern Languages	09

Substitute Teaching Experience

School Year	Name of School District	Address	Approximate Number of Days Taught
19 -19	All of my teaching has been on the college and university level,		
19 -19	and I have never served as a substitute teacher.		
19 -19			

Please state grade level (junior high or senior high) and subject area preference.
Senior high school: French

Please note any restrictions to your availability.
None

Hand delivered, 09-10-1984 — early afternoon. appointment with Principal, Daniel Moon, scheduled for 09-12-1984 at 10 A.M.

No school nurse allowed me to use her typewriter to complete this application. I attached a copy of my Professional Certificate and also copies of my three College degrees.

9-10-84-P8

Picked up completed and returned on 09-10-1984; copies of PA. Certificate & also all college degrees & transcripts attached.

LAKELAND SCHOOL DISTRICT
R.D. #1 JERMYN, PENNSYLVANIA 18433

PROFESSIONAL APPLICATION

DATE 09-10-1984

Mr. / Mrs. / Miss — Last: Powell — First: Silas — Initial: Robert

Present Address P.O. Box 161 Phone 717-679-2979

Carbondale, PA Zip 18407

Permanent Address SAME Phone ——

(If different from above —— Zip ——

Position Desired: Elementary —— Secondary yes

Other Professional Position - Name Position ——

Are you under a contract for the school year for which application is made? NO

If "Yes" when could you be relieved from contract? ——

Present Position Freelance writer and editor Present Salary —— Salary Request Prevailing wage

Instructions:
1. Every item **must** be completed.
2. An attached resume is acceptable **only** if all items are completed.
3. If the item does not apply, write the letters N.A. (not applicable). **Please print or type.**
4. It is the responsibility of the applicant to have forwarded, Official College Transcripts, Pennsylvania Teaching Certificate, and Placement File to the Office of the Superintendent. Application will actively be considered **only** upon receipt of same.
5. YOU WILL BE CONTACTED FOR AN INTERVIEW **ONLY** IF YOUR CANDIDACY IS BEING ACTIVELY CONSIDERED. PLEASE **DO NOT** CALL OR WRITE REQUESTING AN INTERVIEW.

Please return to:
Thomas J. O'Donnell
Superintendent of Schools
Lakeland School District
R. D. #1 Jermyn, Pa. 18433

OFFICE USE ONLY

Receipt		
References		
Transcript		
Teaching Certificate		
Placement File		
Physical		
Interview		
Salary		
File		

I. PERSONAL INFORMATION

A. Age 40 Date of Birth 12-12-43 Social Security Number 198340586

B. Maiden Name Silas Robert Powell

C. Circle: (Single) Married Separated Divorced Widowed No. of Children none

D. Have you been under treatment for any mental, nervous, or physical disability during the past two years? ——
If so, explain None

E. List any defects in sight or hearing: None

F. List any other physical defect (s): None

II. EDUCATION AND PROFESSIONAL TRAINING

A.

Name of School or Institution and Location	Yrs. of Attend.	Degree Earned	Major Field
High School Fell High, Simpson, PA	1958 to 1961	Diploma	Academic
College Penn State Univ.	1961 to 1965	B.A.	French
Grad. Work George Wash. Univ.	1965 to 1967	M.A.	French
Other Indiana Univ.	1967 to 1974	Ph. D.	French
	to		

B. (For Elementary School Candidates) Can you teach your own music? N.A.
Art? N.A. Physical Education? N.A. Can you play the piano? N.A.

C. Underscore any of the following which you are able to coach or direct successfuly: Archery, Debates, Football, Golf, Oratorial Contests, Orchestra, Playground Activities, School Paper, School Plays, Soccer, Student Council, Swimming, Tennis, Track, Wrestling, Yearbook, Other Language Clubs, Junior Historians

D. Underscore any of the following clubs which you are able to sponsor:
Bridge, Camera, Chess, Coin, Drama, Foreign Affairs, Golf, Great Books, Handicraft, HY-Y, Leather, Model, Nature, Red Cross, Shop (boys and girls), Sports (boys and girls), Stamp, Subject Matter, Table Tennis, Teen-Age, Tri-Hi-Y,
Other ——

9-10-84-P9